Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
WESTERN DISTRICT OF WASHINGTON, TACOMA DIVISION		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	art 1: Identify Yourself						
		About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):			
1.	Your full name						
	Write the name that is on your government-issued picture identification (for	Grant First name	_	First name			
	example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Alexander Middle name	_	Middle name			
		Pillune		made halle			
		Last name and Suffix (Sr., Jr., II, III)	_	Last name and Suffix (Sr., Jr., II, III)			
2.	All other names you have used in the last 8 years						
	Include your married or maiden names.						
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-8926					

Official Form 101

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and		■ I have not used any business name or EINs. Business name(s)	☐ I have not used any business name or EINs. Business name(s)		
	doing business as names	Dadificas fiamo(s)	Dustrious riamo(s)		
		EINs	EINs		
5.	Where you live		If Debtor 2 lives at a different address:		
		1719 S 23rd St Unit D			
		Tacoma, WA 98405-3133 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code		
		Pierce			
		County	County		
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
6.	Why you are choosing	Check one:			
	this district to file for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)		

Official Form 101 Voluntary Petition for Individuals Filing for Bankruptcy
Case 19-40170-MJH Doc 1 Filed 01/20/19 Ent. 01/20/19 16:06:36 Pg. 3 of 56

Deb	tor 1 Billups, Grant Ale	xander			Case number (if known)	
art	3: Report About Any Bus	sinesses `	You Own	as a Sole Propriet	or	
2.	Are you a sole proprietor of any full- or part-time business?	□ No.	Go to	Part 4.		
		Yes.	Name	e and location of bus	siness	
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	Marketing e of business, if any		
	If you have more than one			6 Pleasant Lake I na, OH 44130-74		
	sole proprietorship, use a separate sheet and attach it			per, Street, City, Sta		
	to this petition.		Chec	k the appropriate bo	x to describe your business:	
				Health Care Busir	ness (as defined in 11 U.S.C. § 101(27A))	
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))	
				Stockbroker (as d	efined in 11 U.S.C. § 101(53A))	
☐ Com		Commodity Broker (as defined in 11 U.S.C. § 101(6))				
				None of the above		
∣3.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines operation	you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set approadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statemeerations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the process.C. 1116(1)(B).			
	For a definition of small	■ No.	I am	not filing under Chap	oter 11.	
	business debtor, see 11 U.S.C. § 101(51D).	□ No.		I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.		
		☐ Yes.	I am	filing under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.	
	D			D	Provide That Nove I have Provide Advantage	
Part	Do you own or have any		Hazardo	us Property or Any	/ Property That Needs Immediate Attention	
•	property that poses or is	No.				
	alleged to pose a threat of imminent and identifiable hazard to public health or	☐ Yes.	What is	the hazard?		
	safety? Or do you own any property that needs immediate attention?			diate attention is why is it needed?		
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where i	s the property?		
					Number, Street, City, State & Zip Code	

Official Form 101 Voluntary Petition for Individuals Filing for Bankruptcy
Case 19-40170-MJH Doc 1 Filed 01/20/19 Ent. 01/20/19 16:06:36 Pg. 4 of 56

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

> The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about

credit counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Voluntary Petition for Individuals Filing for Bankruptcy
Case 19-40170-MJH Doc 1 Filed 01/20/19 Ent. 01/20/19 16:06:36 Pg. 5 of 56 Official Form 101

Debtor 1 Billups, Grant Alexander				Case numb	Case number (if known)		
Part	t 6: Answer These Ques	tions for Re	eporting Purposes				
16.	What kind of debts do you have?	16a.	Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C.§ 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."				
			☐ No. Go to line 16b.				
			Yes. Go to line 17.				
		16b.	Are your debts primarily business debts? <i>Business debts</i> are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.				
			☐ No. Go to line 16c.				
			☐ Yes. Go to line 17.				
		16c.	State the type of debts you o	we that are not consumer debts or business	debts		
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapte	r 7. Go to line 18.			
	Do you estimate that afte any exempt property is excluded and	r ■ Yes.		I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?			
	administrative expenses are paid that funds will be available for distribution to unsecured creditors?	_	■ No				
		e	Yes				
18.	How many Creditors do you estimate that you owe?	■ 1-49		□ 1,000-5,000	□ 25,001-50,000		
		□ 50-99		<u> </u>	<u></u> 50,001-100,000		
		□ 100-1 □ 200-9		□ 10,001-25,000	☐ More than100,000		
19.	How much do you	\$0 - \$	50 000	☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion		
	estimate your assets to be worth?		01 - \$100,000	☐ \$10,000,001 - \$50 million	□ \$1,000,000,001 - \$10 billion		
			001 - \$500,000	\$50,000,001 - \$100 million	□ \$10,000,000,001 - \$50 billion		
		□ \$500,	001 - \$1 million	☐ \$100,000,001 - \$500 million	☐ More than \$50 billion		
20.	How much do you	□ \$0 - \$	50,000	☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion		
	estimate your liabilities to be?	_	001 - \$100,000	☐ \$10,000,001 - \$50 million	□ \$1,000,000,001 - \$10 billion		
	De:	□ \$100,	001 - \$500,000	□ \$50,000,001 - \$100 million	□ \$10,000,000,001 - \$50 billion		
		□ \$500,	001 - \$1 million	☐ \$100,000,001 - \$500 million	☐ More than \$50 billion		
Part	7: Sign Below						
For	you	I have ex	amined this petition, and I dec	lare under penalty of perjury that the informa	ation provided is true and correct.		
				7, I am aware that I may proceed, if eligible ailable under each chapter, and I choose to p	e, under Chapter 7, 11,12, or 13 of title 11, Uniter proceed under Chapter 7.		
			attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I obtained and read the notice required by 11 U.S.C. § 342(b).				
		I request	equest relief in accordance with the chapter of title 11, United States Code, specified in this petition.				
		case can	tand making a false statement, concealing property, or obtaining money or property by fraud in connection with a ban n result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 357 nt A. Billups				
		Grant A	Alexander Billups e of Debtor 1	Signature of Debt	tor 2		
		Executed	I on January 20, 2019	Executed on			
			MM / DD / YYYY	M	M / DD / YYYY		

Official Form 101 Voluntary Petition for Individuals Filing for Bankruptcy Case 19-40170-MJH Doc 1 Filed 01/20/19 Ent. 01/20/19 16:06:36 Pg. 6 of 56

Debtor 1 Billups, Grant Ale	exander	Case	e number (if known)	
For your attorney, if you are represented by one If you are not represented by an attorney, you do not need	I, the attorney for the debtor(s) named in this pet Chapter 7, 11, 12, or 13 of title 11, United States person is eligible. I also certify that I have deliver which § 707(b)(4)(D) applies, certify that I have r petition is incorrect.	Code, and have explained tred to the debtor(s) the notice	e required by 11 U.S.C. § 342(b) and, in a case in	ne n
to file this page.	/s/ Rafal Gorski Signature of Attorney for Debtor	Date	January 20, 2019 MM / DD / YYYY	
	Rafal Gorski Printed name			
	The Law Office Of Rafal A. Gorski Firm name			
	10116 36th Avenue Ct SW Ste 206 Lakewood, WA 98499-6003 Number, Street, City, State & ZIP Code			
	Contact phone	Email address	gorskirafal@hotmail.com	

Rafal Gorski
Bar number & State

Official Form 101 Voluntary Petition for Individuals Filing for Bankruptcy
Case 19-40170-MJH Doc 1 Filed 01/20/19 Ent. 01/20/19 16:06:36 Pg. 7 of 56

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United States Bankruptcy Court Western District of Washington, Tacoma Division

IN RE:		Case No
Billups, Grant Alexander		Chapter 7
	Debtor(s)	
	VERIFICATION OF CREDITO	R MATRIX
The above named debtor(s) her	eby verify(ies) that the attached matrix listing	ng creditors is true to the best of my(our) knowledge.
Date: January 20, 2019	Signature: /s/ Grant A. Billups	
	Grant A. Billups	Debtor
Date:	Signature:	
		Joint Debtor, if any

Advance America Cash Advance 15105 Main St E Unit 105 Sumner, WA 98390-2695

Alaska Usa Federal Credit Union PO Box 196020 Anchorage, AK 99519-6020

Bank of America PO Box 982238 El Paso, TX 79998-2238

Capital One Bank USA NA PO Box 30281 Salt Lake City, UT 84130-0281

Chex Systems 7805 Hudson Road Suite 100 Woodbury, MN 55125

Convergent Outsourcing Inc PO Box 9004 Renton, WA 98057-9004

Credit Acceptance Corp PO Box 5070 Southfield, MI 48086-5070 Credit One Bank PO Box 98872 Las Vegas, NV 89193-8872

Diversified Consultants PO Box 551268 Jaccksonville, WA 32225

DSNB/Macy's PO Box 8218 Mason, OH 45040-8218

Equifax PO Box 30272 Tampa, FL 33630-0000

Experian PO Box 9558 Profile Maintenance Sioux Falls, SD 75013

Fred Meyers 1000 Macarthur Blvd Mahwah, NJ 07430-2035

Harborstone Credit Union PO Box 4207 Tacoma, WA 98438-0207

Internal Revenue Service 915 2nd Avenue M/S W244 Seattle, WA 98174

IRS
P O Box 7346
Philadelphia, PA 19101-7346

Jared Gallery of Jewelry 375 Ghent Rd Akron, OH 44333-4601

Kohl's Department Store PO Box 3115 Milwaukee, WI 53201-3115

LVNV Funding LLC PO Box 1269 Greenville, SC 29602-1269

MoneyTree 10437 Pacific Ave S Tacoma, WA 98444-6051

Onemain Financial PO Box 1010 Evansville, IN 47706-1010 Patenaude & Felix, A.P.C. 19401 40th Ave W Ste 208 Lynnwood, WA 98036-5600

Pierce County Assessor Treasurer 2401 South 35th Street Room 142 Tacoma, WA 98409

Pierce County District Court 930 Tacoma Avenue So Tacoma, WA 98402

Pierce County Superior Court 930 Tacoma Ave S # 113 Tacoma, WA 98402-2105

Planet FItness 817 E 72nd St Tacoma, WA 98404-1094

Rainier Dental Sumner 15306 Main St E Ste A Sumner, WA 98390-2640

Santander Consumer USA PO Box 961245 Fort Worth, TX 76161-0244 Sprint PO Box 54977 Los Angeles, CA 90054-0977

Suttell & Hammer, P.S. PO Box C-90006 Bellevue, WA 98009

The Illuminating Company PO Box 3687 Akron, OH 44309-3687

Transunion 555 West Adams Street Chicago, IL 60611

Wells Fargo Dealer Services PO Box 1697 Winterville, NC 28590-1697

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United States Bankruptcy Court Western District of Washington, Tacoma Division

IN RE:		Case No	
Billups, Grant Alexander		Chapter 7	
Debtor(s)		r	
	ON OF NOTICE TO CONSUME 342(b) OF THE BANKRUPTCY	` '	
Certificate of [Non-Attorney] Bankruptcy Petit	ion Preparer	
I, the [non-attorney] bankruptcy petition preparer notice, as required by § 342(b) of the Bankruptcy		ertify that I delivered to the	e debtor the attached
Printed Name and title, if any, of Bankruptcy Peti Address:	Social Security number petition preparer is not the Social Security number principal, responsible the bankruptcy petition (Required by 11 U.S.C.)	an individual, state mber of the officer, person, or partner of a preparer.)	
X		_ ` • •	,
	Certificate of the Debtor		
I (We), the debtor(s), affirm that I (we) have received	ived and read the attached notice, as re	equired by § 342(b) of the I	Bankruptcy Code.
Billups, Grant Alexander	X /s/ Grant A. Bill	-	1/20/2019
Printed Name(s) of Debtor(s)	Signature of Del	btor	Date
Case No. (if known)	X		

Instructions: Attach a copy of Form B 201A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) **only** if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

Signature of Joint Debtor (if any)

Date

Fill in Abio	information to identi	fu van aan		
	information to identi			
Debtor 1	Grant Alexander First Name	Middle Name	Last Name	
Debtor 2	-			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bank	kruptcy Court for the:	WESTERN DIST	FRICT OF WASHINGTON, TACOMA DIVISION	
Case number				
(if known)				☐ Check if this is an amended filing
				amended ming
O#: -: -! F	400			
Official For				_
Statemen	t of Intentio	n for Indi	viduals Filing Under Chapte	er 7 12/15
16	deed Crasses deed by		Il and this farm if	
	dual filing under char claims secured by you		i out this form it:	
_	d personal property a		ot expired	
You must file this t	form with the court wi	ithin 30 days after	you file your bankruptcy petition or by the date set for	
whicheve the form	er is earlier, unless the	e court extends the	e time for cause. You must also send copies to the cr	editors and lessors you list on
If two married near	nlo are filing together	in a joint case he	th are equally responsible for supplying correct infor	rmation. Both dobtors must sign
	the form.	iii a joiiii case, bo	th are equally responsible for supplying correct infor	mation. Both debtors must sign
Be as complete an	d accurate as possibl	e. If more space is	needed, attach a separate sheet to this form. On the	top of any additional pages,
write you	ır name and case num	nber (if known).		
Part 1: List You	ır Creditors Who Have	Secured Claims		
1 For any creditor	s that you listed in Pa	urt 1 of Schedule D	: Creditors Who Have Claims Secured by Property (C	Official Form 106D) fill in the
information belo	ow.			,
Identify the cred	litor and the property the	nat is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's Sa	ntander Consumer	, IIS V	☐ Surrender the property.	
name:	intander Consumer	UUA	Retain the property and redeem it.	No
Descriptions	2010 21 11 11	L (50.000	☐ Retain the property and enter into a <i>Reaffirmation</i>	☐ Yes
property	2013 Cheverolt Vomiles)	it (50,000	Agreement.	
securing debt:			Retain the property and [explain]: Retain and pay pursuant to contract	
ŭ			Totalia pay parametric consuct	-
	r Unexpired Personal		in Schedule G: Executory Contracts and Unexpired I	cases (Official Form 106C) fill in
the information be	low. Do not list real es	state leases. Unex	pired leases are leases that are still in effect; the leas	
may assume an un	nexpired personal pro	perty lease if the to	rustee does not assume it. 11 U.S.C. § 365(p)(2).	
Describe your une	expired personal prop	erty leases		Will the lease be assumed?
Lessor's name:	Planet Fitness			_
Lessoi s name.	Planet Fitness	•		■ No
				☐ Yes
Description of lease Property:	ed Gym Members	ship		
, ,				
Part 3: Sign Be	low			
Juli De	iO14			
Official Form 108		Statement of I	ntention for Individuals Filing Under Chapter 7	page 1

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Deb	btor 1 Billups, Grant Alexander	Case number (if known)
	er penalty of perjury, I declare that I have indicated my perty that is subject to an unexpired lease.	r intention about any property of my estate that secures a debt and any personal
X	/s/ Grant A. Billups	x
	Grant Alexander Billups	Signature of Debtor 2
	Signature of Debtor 1	
	Date January 20, 2019	Date

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

page 2

	Fill in this	information to ident	fy your case and this filing	j:			
Debte	or 1	Grant Alexander					
Debte	or 2	First Name	Middle Name	Last Name	1		
(Spous	se, if filing)	First Name	Middle Name	Last Name			
Unite	ed States Ban	kruptcy Court for the:	WESTERN DISTRICT OF	WASHINGTON, TACOMA D	IVISION		
Case	number						Check if this is an
						_	amended filing
Offi	icial For	m 106A/B					
		A/B: Prop					12/15
think in	t fits best. Be	as complete and accura	te as possible. If two married	ce. If an asset fits in more than people are filing together, both on the top of any additional page.	are equally responsible	for supplyi	ng correct
Part 1	Describe E	ach Residence, Buildin	յ, Land, or Other Real Estate ՝	ou Own or Have an Interest In			
1. Do	you own or ha	ve any legal or equitabl	e interest in any residence, bu	illding, land, or similar property?	?		
	No. Go to Part	2.					
_	Yes. Where is						
Part 2	Describe Y	our Vehicles					
	2000						
	No	cks, tractors, sport ut	ility vehicles, motorcycles				
	Yes						
3.1	Make:		Who has an intere	st in the property? Check one			or exemptions. Put
0.1	Model:		Debtor 1 only	ot in the property. Onesk one			aims on Schedule D: Secured by Property.
	Year:		Debtor 2 only		Current value of		urrent value of the
	Approximate	mileage:	Debtor 1 and De	ebtor 2 only	entire property?		ortion you own?
	Other informa		At least one of t	ne debtors and another			
	2013 Che	verolt Volt (50,000	☐ Check if this is	community property	\$9,000	0.00	\$9,000.00
	iiiics		(see instructions)	community property			. ,
Exa	amples: Boats			vehicles, other vehicles, and s, snowmobiles, motorcycle acc			
				ries from Part 2, including an			\$9,000.00
Part 3		our Personal and Hous					
Do y	ou own or ha	ave any legal or equit	able interest in any of the f	ollowing items?		port Do n	rent value of the ion you own? not deduct secured ns or exemptions.
E		ds and furnishings or appliances, furniture,	linens, china, kitchenware			Jidii	J.

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Official Form 106A/B

page 1

Schedule A/B: Property

Deb	tor 1	Billups, Gra	nt Alexander	Case number (if ki	nown)
	Yes.	Describe	Household goods & furnishings		\$1,000.00
E] No	<i>les:</i> Televisions a	nd radios; audio, video, stereo, and digital equipment; I phones, cameras, media players, games	computers, printers, scanners; music	
			Lap Top & Cell phone		\$650.00
E	xampi No		figurines; paintings, prints, or other artwork; books, p nemorabilia, collectibles	ictures, or other art objects; stamp, co	oin, or baseball card collections; other
_	- 163.	Describe	Russell Wilson Super Bowl Seahawks J	eresey	\$200.00
E		ent for sports and les: Sports, photo instruments	nd hobbies graphic, exercise, and other hobby equipment; bicycle	es, pool tables, golf clubs, skis; canoe	s and kayaks; carpentry tools; musical
	Yes.	Describe			
	No		s, shotguns, ammunition, and related equipment		
] No	<i>ples:</i> Everyday clo	othes, furs, leather coats, designer wear, shoes, acce	ssories	
	Yes.	Describe	Clothing		\$500.00
			Ciotining		
] No	y ples: Everyday jev Describe	welry, costume jewelry, engagement rings, wedding ri 2 watches & necklace	ngs, heirloom jewelry, watches, gems,	gold, silver\$200.00
•	<i>Exam_l</i> I No	arm animals ples: Dogs, cats, Describe	birds, horses		
			d become the many and the many and the	ding only bookb side you did not lie	
_	No	iller personal an	d household items you did not already list, inclu	unig any nealth alus you did not ils	ot.
	Yes.	Give specific inf	ormation		
15.			of all of your entries from Part 3, including any e		\$2,550.00
		escribe Your Finar			
Do y	ou ov	wn or have any l	egal or equitable interest in any of the following?		Current value of the portion you own? Do not deduct secured

Official Form 106A/B Schedule A/B: Property

claims or exemptions.

page 2

De	btor 1	Billups, Grar	nt Alexa	ander	Case number (if known)	
	■ No		-	•	a safe deposit box, and on hand when you file your petition	
	☐ Yes					
	•				certificates of deposit; shares in credit unions, brokerage houses, a the same institution, list each.	and other similar
	_				Institution name:	
			17.1.	Checking Account	Checking Account with Wells Fargo Bank XXXX8490	\$917.00
			17.2.	Savings Account	Savings Account with Wells Fargo Bank XXXX5014	\$50.00
			17.3.	Savings Account	Savings Account with Bank of America XXXX2862	\$0.00
18.		mutual funds, o <i>lles:</i> Bond funds, i			e firms, money market accounts	
	☐ Yes			Institution or issuer name	::	
	joint v ■ No	enture	rmation	nterests in incorporated about them	and unincorporated businesses, including an interest in an % of ownership:	LLC, partnership, and
			IVai	ne or entity.	70 of ownership.	
	Negotia Non-na ■ No	able instruments ii	nclude ponts are the mation a	ersonal checks, cashiers' on the contract of t	and non-negotiable instruments checks, promissory notes, and money orders. a someone by signing or delivering them.	
		n ent or pension a bles: Interests in IF			, thrift savings accounts, or other pension or profit-sharing plans	
	_	List each account	•	ely. of account:	Institution name:	
	Your sl Examp		deposits	you have made so that you	u may continue service or use from a company utilities (electric, gas, water), telecommunications companies, or ot	hers
	■ No □ Yes.				Institution name or individual:	
23.	Annuiti ■ No	es (A contract for	a period	ic payment of money to you	u, either for life or for a number of years)	
	☐ Yes	lss	uer nam	e and description.		
		s in an education C. §§ 530(b)(1), 52			d ABLE program, or under a qualified state tuition program.	
	☐ Yes	Ins	stitution r	name and description. Sepa	arately file the records of any interests.11 U.S.C. § 521(c):	
	■ No	equitable or futu			han anything listed in line 1), and rights or powers exercisab	le for your benefit

Official Form 106A/B Schedule A/B: Property page 3

De	ebtor 1	Billups, Grant Alexander		Case number (if known)	
26.	_Examp		secrets, and other intellectual property ites, proceeds from royalties and licensing agreem	ents	
	■ No □ Yes.	Give specific information about the	nem		
27.	Examp	es, franchises, and other generalles: Building permits, exclusive lic	al intangibles enses, cooperative association holdings, liquor lice	enses, professional licenses	
	■ No □ Yes.	Give specific information about the	nem		
M	oney or p	property owed to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
	. Tax ref ı □ No	unds owed to you			·
	Yes. 0	Give specific information about the	em, including whether you already filed the returns	and the tax years	
			Potential 2018 income Tax Refund (estimated amount not filed yet)	Federal	\$600.00
29.	■ No		ny, spousal support, child support, maintenance, o	divorce settlement, property set	tlement
30.	Examp ■ No	amounts someone owes you bles: Unpaid wages, disability insurunpaid loans you made to so Give specific information	rance payments, disability benefits, sick pay, vacati omeone else	ion pay, workers' compensatior	ı, Social Security benefits;
31.	. Interest	ts in insurance policies	ance; health savings account (HSA); credit, homeo	wner's, or renter's insurance	
	Yes. N	Name the insurance company of e		oficion n	Currender or refund
		Company		eficiary:	Surrender or refund value:
			rm Llfe Insurance Policy employer (no cash value)		unknown
32.	If you a died.	erest in property that is due yo are the beneficiary of a living trust, Give specific information	u from someone who has died expect proceeds from a life insurance policy, or are	e currently entitled to receive pro	perty because someone has
33.			or not you have filed a lawsuit or made a dema utes, insurance claims, or rights to sue	nd for payment	
		Describe each claim			
34.	■ No	contingent and unliquidated clair	ms of every nature, including counterclaims o	of the debtor and rights to set	off claims
35		ancial assets you did not alread	dy liet		
JJ.	□No	•	иу пос		
	Yes.	Give specific information			

Official Form 106A/B Schedule A/B: Property page 4

Deb	tor 1	Billups, Grant Alexande	r		Case number (if known)	_
			Back wages for work uncollectible)	done for Ron Martn	ez (considered	\$2,000.00
36.		ne dollar value of all of your e . Write that number here			s you have attached for	\$3,567.00
Part	5: Des	cribe Any Business-Related Pro	perty You Own or Have an Inte	rest In. List any real estat	e in Part 1.	
37. D	o you o	wn or have any legal or equitable	interest in any business-relat	ed property?		
	No. Go	to Part 6.				
	Yes. G	o to line 38.				
Part		scribe Any Farm- and Commercia ou own or have an interest in farmla		u Own or Have an Interes	t In.	
16. C	Do vou	own or have any legal or equ	itable interest in any farm-	or commercial fishing	-related property?	
		Go to Part 7.		,		
	☐ Yes.	Go to line 47.				
Part	7:	Describe All Property You Own	or Have an Interest in That Yo	ou Did Not List Above		
:2 F	Do vou	have other property of any ki	nd you did not alroady list	<u> </u>		
		les: Season tickets, country clu		·		
	No					
	Yes. C	Give specific information				
- 4			odala a farana Band 7 Malia dh	- (Г	40.00
54.	Add tr	ne dollar value of all of your e	ntries from Part 7. Write th	at number nere		\$0.00
Part	Q.	List the Totals of Each Part of the	e Form			
гап	0.	LIST THE TOTALS OF LACIT PART OF THE	s roilli			
55.	Part 1	: Total real estate, line 2				\$0.00
		: Total vehicles, line 5		\$9,000.00		
		: Total personal and househo	·	\$2,550.00		
		: Total financial assets, line 3		\$3,567.00		
59.		: Total business-related prop		\$0.00		
60.	Part 6	: Total farm- and fishing-relat	ed property, line 52	\$0.00		
61.	Part 7	: Total other property not list	ed, line 54	+\$0.00		
62.	Total _I	personal property. Add lines 5	66 through 61	\$15,117.00	Copy personal property total	al \$15,117.00
63.	Total	of all property on Schedule A	/B . Add line 55 + line 62			\$15,117.00

Official Form 106A/B Schedule A/B: Property page 5

	Fill in this informati	on to identify	/ your case:				
De		Alexander					
	First Name		Middle Name	L	ast Name	}	
	ebtor 2 ouse if, filing) First Name		Middle Name	L	ast Name		
Un	ited States Bankruptcy Co	urt for the:	WESTERN DISTRICT OF W	/ASHI	INGTON, TACOMA DIVISION		
Ca	ise number						
(if k	nown)						Check if this is an amended filing
O [,]	fficial Form 106	<u>sc</u>					
S	chedule C: T	he Pro	pperty You Cla	im	as Exempt		4/16
oro _l out	perty you listed on <i>Schedul</i>	e A/B: Prope	rty (Official Form 106A/B) as you	ur sou	, both are equally responsible for sup rrce, list the property that you claim as ry. On the top of any additional pages	s exempt. If	more space is needed, fill
app fun to a app	olicable statutory limit. So ds—may be unlimited in	ome exempti dollar amou t and the val	ons—such as those for healt nt. However, if you claim an e ue of the property is determir	h aids exemp	market value of the property bein s, rights to receive certain benefits otion of 100% of fair market value o exceed that amount, your exemp	s, and tax-e under a law	exempt retirement that limits the exemption
1.	Which set of exemption	s are you cla	aiming? Check one only, even	if you	r spouse is filing with you.		
	☐ You are claiming state	and federal n	onbankruptcy exemptions. 11 l	J.S.C.	. § 522(b)(3)		
	■ You are claiming feder	al exemptions	. 11 U.S.C. § 522(b)(2)				
2.	For any property you list	st on Schedu	ıle A/B that you claim as exen	npt, fi	ill in the information below.		
	Brief description of the pro		on Current value of the portion you own	Amo	ount of the exemption you claim	Specific la	ws that allow exemption
			Copy the value from Schedule A/B	Che	ck only one box for each exemption.		
	Household goods & Line from Schedule A/B.		s \$1,000.00	•	\$1,000.00	11 USC	§ 522(d)(3)
	Line from deficación A/E	J. 1			100% of fair market value, up to any applicable statutory limit		
	Lap Top & Cell phor		\$650.00		\$650.00	11 USC	§ 522(d)(5)
	Line nom schedule A/B.	, . i			100% of fair market value, up to any applicable statutory limit		
	Russell Wilson Supe Seahawks Jeresey	er Bowl	\$200.00		\$200.00	11 USC	§ 522(d)(5)
	Line from Schedule A/B.	3.1			100% of fair market value, up to any applicable statutory limit		

Official Form 106C

Clothing

Line from Schedule A/B: 11.1

2 watches & necklace

Line from Schedule A/B: 12.1

Schedule C: The Property You Claim as Exempt

\$500.00

\$200.00

page 1 of 2

11 USC § 522(d)(3)

11 USC § 522(d)(4)

\$500.00

\$200.00

100% of fair market value, up to any applicable statutory limit

100% of fair market value, up to any applicable statutory limit

	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption			
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.				
	Checking Account with Wells Fargo Bank XXXX8490	\$917.00		\$917.00	11 USC § 522(d)(5)			
	Line from Schedule A/B. 17.1			100% of fair market value, up to any applicable statutory limit				
	Savings Account with Wells Fargo Bank XXXX5014	\$50.00		\$50.00	11 USC § 522(d)(5)			
	Line from Schedule A/B. 17.2			100% of fair market value, up to any applicable statutory limit				
	Potential 2018 income Tax Refund (estimated amount not filed yet)	\$600.00		\$600.00	11 USC § 522(d)(5)			
	Line from Schedule A/B. 28.1			100% of fair market value, up to any applicable statutory limit				
	Back wages for work done for Ron Martnez (considered uncollectible)	\$2,000.00		\$2,000.00	11 USC § 522(d)(5)			
	Line from Schedule A/B. 35.1			100% of fair market value, up to any applicable statutory limit				
3.	Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) No							
	Yes. Did you acquire the property covered	by the exemption within	1,21	5 days before you filed this case?				
	□ No							
	☐ Yes							

Official Form 106C

	Fill in this information to i	dentify your case:			
Deb	tor 1 Grant Alexa	nder Billups			
<u>.</u>	First Name	Middle Name Last Name		}	
	tor 2 use if, filing) First Name	Middle Name Last Name			
Unit	ed States Bankruptcy Court for	the: WESTERN DISTRICT OF WASHINGTON, T	ACOMA DIVISION		
Casi	e number				
(if kno				-	if this is an led filing
∩ffi	cial Form 106D				
		ors Who Have Claims Secured	by Propert	у	12/15
	ed, copy the Additional Page, fill i	ole. If two married people are filing together, both are equ t out, number the entries, and attach it to this form. On th			
1. Do	any creditors have claims secure	ed by your property?			
l	\square No. Check this box and subm	nit this form to the court with your other schedules. You I	have nothing else to re	port on this form.	
- 1	Yes. Fill in all of the information	on below.			
Part	1: List All Secured Claims				
		nas more than one secured claim, list the creditor separately	Column A	Column B	Column C
		has a particular claim, list the other creditors in Part 2. As abetical order according to the creditor 's name.	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1	Santander Consumer USA	Describe the property that secures the claim:	\$13,908.00	\$9,000.00	\$4,908.00
	Creditor's Name	2013 Cheverolt Volt (50,000 miles)			
	PO Box 961245 Fort Worth, TX 76161-0244	As of the date you file, the claim is: Check all that apply. ☐ Contingent			
	Number, Street, City, State & Zip Code	☐ Unliquidated ☐ Disputed			
Who	owes the debt? Check one.	Nature of lien. Check all that apply.			
_	ebtor 1 only ebtor 2 only	☐ An agreement you made (such as mortgage or sector car loan)	ured		
_	ebtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
ПА	t least one of the debtors and anoth	_			
	theck if this claim relates to a community debt	Other (including a right to offset) Debt for 20	13 Chevrolet Volt		
Date	debt was incurred	Last 4 digits of account number 2420			
Δdd	the dollar value of your entries in	Column A on this page. Write that number here:	\$13,908	.00	
If thi		Id the dollar value totals from all pages.	\$13,908		
Part	2: List Others to Be Notified	d for a Debt That You Already Listed			
		•			

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

page 1 of 1

F	ill in this info	ormation to identify your	case:								
Deb	otor 1	Grant Alexander B	Rilluns					1			
		First Name		Name	Last Nan	ne)			
	otor 2 use if, filing)	First Name	Middle	Name	Last Nan	20					
(Spo	use II, IIIIIg)	i iist ivaine									
Unit	ted States Ba	nkruptcy Court for the:	WESTER	N DISTRICT	OF WASHINGTO	ON, TACO	MA DIVISION				
Cas	se number _] Check	if this is a	an
]	amend	ed filing	
Be as any e Sche D: Crithe Coase Par 1.	s complete and executory controlled G: Executeditors Who Hontinuation Panumber (if known the List All Do any creditor No. Go to Panumber (if known the List All Of your identify what types.	/F: Creditors WI I accurate as possible. Use racts or unexpired leases th tory Contracts and Unexpira ave Claims Secured by Pro age to this page. If you have own). I of Your PRIORITY Unsurs have priority unsecured art 2. priority unsecured claims. are of claim it is. If a claim has	Part 1 for chat could red Leases (perty. If moe no information and information	reditors with sult in a clain Official Form re space is not ation to reportation to reportations you?	PRIORITY claims a n. Also list execute 106G). Do not includeded, copy the Patt in a Part, do not fi	nd Part 2 fc ory contract ide any cre rt you need le that Part red claim, lis claim here a	ts on Schedule A/B: P ditors with partially s I, fill it out, number th . On the top of any ad to the top of any ad st the creditor separate and show both priority a	Property (Of ecured clain e entries in Iditional page of the page of the Ity for each c and nonpriori	ficial Forn ms that ar the boxes ges, write laim. For e ty amounts	n 106A/B) e listed in s on the let your name each claim s. As much	r party to and on Schedule ft. Attach e and
	1. If more than	e claims in alphabetical order one creditor holds a particular ation of each type of claim, se	r claim, list th	ne other credit	ors in Part 3.		Total claim	Priority	the Contir	Nonprio	
	1						_	amount		amount	
2.1		Revenue Service editor's Name		Last 4 digits	of account number	8926	unknown	<u> </u>	\$0.00		\$0.00
	Seattle, Number S Who incurred Debtor 1 c Debtor 1 a Debtor 1 a At least or Check if t Is the claims	•		As of the dat Contingen Unliquidat Disputed Type of PRIC Domestic Taxes and	PRITY unsecured cl support obligations d certain other debts death or personal in	aim: you owe the	e government	-			
	■ No			Other. Spe	ecify		liabilita.				
	☐ Yes				Any poter	ntial tax l	liability				

Schedule E/F: Creditors Who Have Unsecured Claims

Page 1 of 8

ebtor 1 Billups, Grant Alexander				
Pierce County Assessor Treasurer Priority Creditor's Name	Last 4 digits of account number	unknown	\$0.00	\$0.0
Filolity Cleditor's Name	When was the debt incurred?			
2401 South 35th Street Room 142 Tacoma, WA 98409				
Number Street City State ZIp Code	As of the date you file, the claim is: Check	all that apply		
Who incurred the debt? Check one.	☐ Contingent			
Debtor 1 only	☐ Unliquidated			
Debtor 2 only	☐ Disputed			
☐ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:			
☐ At least one of the debtors and another	☐ Domestic support obligations			
☐ Check if this claim is for a community debt	■ Taxes and certain other debts you owe the	ne government		
Is the claim subject to offset?	☐ Claims for death or personal injury while	you were intoxicated		
No	☐ Other. Specify			
Yes	Any potential ass	sessment liability		
 No. You have nothing to report in this part. Submit ■ Yes. List all of your nonpriority unsecured claims in the 	this form to the court with your other schedules	s each claim. If a creditor has n		
☐ No. You have nothing to report in this part. Submit ■ Yes.	this form to the court with your other schedules alphabetical order of the creditor who holds laim. For each claim listed, identify what type of	s each claim. If a creditor has no claim it is. Do not list claims alre	eady included in Part	1. If more
■ No. You have nothing to report in this part. Submit ■ Yes. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each c than one creditor holds a particular claim, list the other 2.	this form to the court with your other schedules alphabetical order of the creditor who holds laim. For each claim listed, identify what type of creditors in Part 3.If you have more than three	s each claim. If a creditor has n claim it is. Do not list claims alre nonpriority unsecured claims fill	eady included in Part	1. If more Page of Par
 No. You have nothing to report in this part. Submit ■ Yes. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each c than one creditor holds a particular claim, list the other 2. 	this form to the court with your other schedules alphabetical order of the creditor who holds laim. For each claim listed, identify what type of creditors in Part 3.If you have more than three Last 4 digits of account number 00	s each claim. If a creditor has n claim it is. Do not list claims alre nonpriority unsecured claims fill	eady included in Part out the Continuation	1. If more Page of Pai
□ No. You have nothing to report in this part. Submit ■ Yes. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each c than one creditor holds a particular claim, list the other 2. Advance America Cash Advance Nonpriority Creditor's Name 15105 Main St E Unit 105 Sumner, WA 98390-2695	this form to the court with your other schedules alphabetical order of the creditor who holds laim. For each claim listed, identify what type of creditors in Part 3.lf you have more than three Last 4 digits of account number When was the debt incurred?	s each claim. If a creditor has n claim it is. Do not list claims alro nonpriority unsecured claims fill	eady included in Part out the Continuation	1. If more Page of Par
■ No. You have nothing to report in this part. Submit ■ Yes. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each c than one creditor holds a particular claim, list the other 2. Advance America Cash Advance Nonpriority Creditor's Name 15105 Main St E Unit 105	this form to the court with your other schedules alphabetical order of the creditor who holds laim. For each claim listed, identify what type of creditors in Part 3.If you have more than three Last 4 digits of account number 00	s each claim. If a creditor has n claim it is. Do not list claims alro nonpriority unsecured claims fill	eady included in Part out the Continuation	1. If more Page of Par
■ No. You have nothing to report in this part. Submit ■ Yes. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each c than one creditor holds a particular claim, list the other 2. Advance America Cash Advance Nonpriority Creditor's Name 15105 Main St E Unit 105 Sumner, WA 98390-2695 Number Street City State Zlp Code	this form to the court with your other schedules alphabetical order of the creditor who holds laim. For each claim listed, identify what type of creditors in Part 3.lf you have more than three Last 4 digits of account number When was the debt incurred?	s each claim. If a creditor has n claim it is. Do not list claims alro nonpriority unsecured claims fill	eady included in Part out the Continuation	1. If more Page of Par
■ No. You have nothing to report in this part. Submit ■ Yes. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each of than one creditor holds a particular claim, list the other 2. Advance America Cash Advance Nonpriority Creditor's Name 15105 Main St E Unit 105 Sumner, WA 98390-2695 Number Street City State Zlp Code Who incurred the debt? Check one.	this form to the court with your other schedules alphabetical order of the creditor who holds laim. For each claim listed, identify what type of creditors in Part 3.If you have more than three Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Ch	s each claim. If a creditor has n claim it is. Do not list claims alro nonpriority unsecured claims fill	eady included in Part out the Continuation	1. If more Page of Par
□ No. You have nothing to report in this part. Submit ■ Yes. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each of than one creditor holds a particular claim, list the other 2. Advance America Cash Advance Nonpriority Creditor's Name 15105 Main St E Unit 105 Sumner, WA 98390-2695 Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only	this form to the court with your other schedules alphabetical order of the creditor who holds laim. For each claim listed, identify what type of creditors in Part 3.If you have more than three Last 4 digits of account number 00 When was the debt incurred? As of the date you file, the claim is: Ch	s each claim. If a creditor has n claim it is. Do not list claims alro nonpriority unsecured claims fill	eady included in Part out the Continuation	1. If more Page of Par
No. You have nothing to report in this part. Submit Yes. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each c than one creditor holds a particular claim, list the other 2. Advance America Cash Advance Nonpriority Creditor's Name 15105 Main St E Unit 105 Sumner, WA 98390-2695 Number Street City State Zlp Code Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 2 only	this form to the court with your other schedules alphabetical order of the creditor who holds laim. For each claim listed, identify what type of creditors in Part 3.If you have more than three Last 4 digits of account number	s each claim. If a creditor has n claim it is. Do not list claims alrononpriority unsecured claims fill 82 eck all that apply	eady included in Part out the Continuation	1. If more Page of Pai
No. You have nothing to report in this part. Submit Yes. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each c than one creditor holds a particular claim, list the other 2. Advance America Cash Advance Nonpriority Creditor's Name 15105 Main St E Unit 105 Sumner, WA 98390-2695 Number Street City State Zlp Code Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only	this form to the court with your other schedules alphabetical order of the creditor who holds laim. For each claim listed, identify what type of creditors in Part 3.If you have more than three Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Ch Contingent Unliquidated Disputed	s each claim. If a creditor has n claim it is. Do not list claims alrononpriority unsecured claims fill 82 eck all that apply	eady included in Part out the Continuation	1. If more Page of Par
No. You have nothing to report in this part. Submit Yes. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each of than one creditor holds a particular claim, list the other 2. Advance America Cash Advance Nonpriority Creditor's Name 15105 Main St E Unit 105 Sumner, WA 98390-2695 Number Street City State Zlp Code Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt	this form to the court with your other schedules alphabetical order of the creditor who holds laim. For each claim listed, identify what type of creditors in Part 3.If you have more than three Last 4 digits of account number 00 When was the debt incurred? As of the date you file, the claim is: Ch Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim Student loans Obligations arising out of a separation	s each claim. If a creditor has n claim it is. Do not list claims alrononpriority unsecured claims fill 82 eck all that apply m:	eady included in Part out the Continuation Total clain	1. If more Page of Par
List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each of than one creditor holds a particular claim, list the other 2. Advance America Cash Advance Nonpriority Creditor's Name 15105 Main St E Unit 105 Sumner, WA 98390-2695 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community	this form to the court with your other schedules alphabetical order of the creditor who holds laim. For each claim listed, identify what type of creditors in Part 3.If you have more than three Last 4 digits of account number 00 When was the debt incurred? As of the date you file, the claim is: Ch Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim Student loans	s each claim. If a creditor has no claim it is. Do not list claims alrow nonpriority unsecured claims fill 82 eck all that apply m:	eady included in Part out the Continuation Total clain	1. If more Page of Par

Schedule E/F: Creditors Who Have Unsecured Claims

Page 2 of 8

Debto	Billups, Grant Alexander	Case number (f known)	
4.2	Advance America Cash Advance Nonpriority Creditor's Name	Last 4 digits of account number 3995	\$400.00
	,,	When was the debt incurred?	
	15105 Main St E Unit 105		
	Sumner, WA 98390-2695 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	• • • • • • • • • • • • • • • • • • • •	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Payday Loan	
4.3	Bank of America	Last 4 digits of account number 8896	\$4,031.00
	Nonpriority Creditor's Name	When we the delt in some 40	. ,
	PO Box 982238	When was the debt incurred?	
	El Paso, TX 79998-2238		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset? ■	report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	■ No		
	Yes	Other. Specify Credit Card	
4.4	Bank of America	Last 4 digits of account number 9531	\$5,453.00
	Nonpriority Creditor's Name	When was the debt incurred?	
	PO Box 982238		
	El Paso, TX 79998-2238	_	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only		
		☐ Contingent	
	Debtor 2 only	Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Credit card	
		— Outon Opeony	

Schedule E/F: Creditors Who Have Unsecured Claims

Page 3 of 8

Billups, Grant Alexander		
Capital One Bank USA NA	Last 4 digits of account number 3838	\$936.00
Nonpriority Creditor's Name	When was the debt incurred?	
PO Box 30281		
Salt Lake City, UT 84130-0281 Number Street City State Zlp Code	As of the date you file the claim is: Check all that apply	
Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Credit card	
Convergent Outsourcing Inc	Last 4 digits of account number 6198	\$397.00
Nonpriority Creditor's Name	When was the debt incurred?	
PO Box 9004	Their was the dest mounted:	
Renton, WA 98057-9004	_	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	_	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans	
☐ Check if this claim is for a community debt		
Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Debt for Cox Communications	
Credit Acceptance Corp	Last 4 digits of account number 5154	\$9,506.29
Nonpriority Creditor's Name	When was the debt incurred?	
PO Box 5070	when was the debt incurred?	
Southfield, MI 48086-5070		
Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
— NO	_ Debt due to repossession of 2011 Ford	
☐ Yes	Other. Specify Fusion	

Schedule E/F: Creditors Who Have Unsecured Claims

Page 4 of 8

Debtor 1 Billups, Grant Alexander	Case number (f known)	
Credit One Bank Nonpriority Creditor's Name	Last 4 digits of account number 9150	\$605.00
Nonpholity Greation's Name	When was the debt incurred?	
PO Box 98872		
Las Vegas, NV 89193-8872 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	\square Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Credit card	
9 DSNB/Macy's	Last 4 digits of account number 1549	\$525.00
Nonpriority Creditor's Name	When was the debt incurred?	
PO Box 8218	When was the debt incurred:	
Mason, OH 45040-8218		
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	Unliquidated	
Debtor 1 and Debtor 2 only	Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community debt	☐ Student loans	
Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Charge Account	
10 Harborstone Credit Union	Last 4 digits of account number 0000	\$10,788.00
Nonpriority Creditor's Name	When we the debt in sure 40	
PO Box 4207	When was the debt incurred?	
Tacoma, WA 98438-0207		
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
— INO	_ Debt due to repossession of 2010 Toyota	
☐ Yes	Other. Specify Corolla	

Schedule E/F: Creditors Who Have Unsecured Claims

Page 5 of 8

Debtor 1 Billups, Grant Alexander	Case number (f known)	
MoneyTree Nonpriority Creditor's Name	Last 4 digits of account number	\$400.00
1 7 7 2 2 2 2 2	When was the debt incurred?	
10437 Pacific Ave S Tacoma, WA 98444-6051 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	, , , , , , , , , , , , , , , , , , , ,	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Payday Loan	
.12 Onemain Financial	Last 4 digits of account number 2764	\$7,512.00
Nonpriority Creditor's Name	When was the debt incurred?	
PO Box 1010		
Evansville, IN 47706-1010	_	
Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	_	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans	
☐ Check if this claim is for a community debt		
Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Loan	
13 Rainier Dental Sumner	Last 4 digits of account number 1007	\$86.00
Nonpriority Creditor's Name	When we the debt in some 40	
15306 Main St E Ste A Sumner, WA 98390-2640	When was the debt incurred?	
Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Dental services	

Schedule E/F: Creditors Who Have Unsecured Claims

Page 6 of 8

Debtor	Billups, Grant Alexander		С	ase number (f known)					
4.14	The Illuminating Company	Last 4 digits of account number	ber	8508	\$103.53				
	Nonpriority Creditor's Name	When was the debt incurred?	,						
	PO Box 3687 Akron, OH 44309-3687 Number Street City State Zlp Code	As of the date you file, the cla	-	Check all that apply	-				
	Who incurred the debt? Check one.	,,							
	Debtor 1 only	☐ Contingent							
	Debtor 2 only	☐ Unliquidated							
	Debtor 1 and Debtor 2 only	☐ Disputed							
	☐ At least one of the debtors and another	Type of NONPRIORITY unsec	cured o	elaim:					
	☐ Check if this claim is for a community	☐ Student loans							
	debt	5	separa	tion agreement or divorce that you did not					
	Is the claim subject to offset?		report as priority claims Debts to pension or profit-sharing plans, and other similar debts						
	■ No	Other Specify Credit C		plans, and other similar debts					
	Yes	-							
Part 3:	List Others to Be Notified About a Del	bt That You Already Listed							
is tryi have	nis page only if you have others to be notified a ing to collect from you for a debt you owe to so more than one creditor for any of the debts tha ed for any debts in Parts 1 or 2, do not fill out o	omeone else, list the original credito at you listed in Parts 1 or 2, list the a	or in Pa	arts 1 or 2, then list the collection agency	here. Similarly, if you				
Name a	and Address	On which entry in Part 1 or Part 2 did	l you lis	t the original creditor?					
IRS	7040	Line 2.1 of (Check one):	■ F	Part 1: Creditors with Priority Unsecured Cla	ms				
	ox 7346 delphia, PA 19101-7346			Part 2: Creditors with Nonpriority Unsecured	Claims				
ı ııııa	ueipina, i A 13101-7340	Last 4 digits of account number		8926					
LVNV	ind Address Funding LLC	On which entry in Part 1 or Part 2 did Line <u>4.5</u> of (<i>Check one</i>):	· —	it the original creditor? Part 1: Creditors with Priority Unsecured Cla	ms				
_	ox 1269 nville, SC 29602-1269		■ F	Part 2: Creditors with Nonpriority Unsecured	Claims				
Greer	iville, 3C 29002-1209	Last 4 digits of account number		3838					
Name a	and Address	On which entry in Part 1 or Part 2 did	l you lis	t the original creditor?					
	aude & Felix, A.P.C.	Line 4.7 of (Check one):		Part 1: Creditors with Priority Unsecured Cla	ms				
	40th Ave W Ste 208		■ F	Part 2: Creditors with Nonpriority Unsecured	Claims				
Lymin	wood, WA 98036-5600	Last 4 digits of account number		5154					
	and Address	On which entry in Part 1 or Part 2 did	-	=					
	e County District Court	Line 4.4 of (Check one):		Part 1: Creditors with Priority Unsecured Cla					
	acoma Avenue So na, WA 98402		■ F	Part 2: Creditors with Nonpriority Unsecured	Claims				
	,	Last 4 digits of account number		9531					
	and Address	On which entry in Part 1 or Part 2 did		9					
	e County Superior Court acoma Ave S # 113	Line 4.7 of (Check one):		Part 1: Creditors with Priority Unsecured Cla					
	ma, WA 98402-2105		I	Part 2: Creditors with Nonpriority Unsecured	Claims				
	,	Last 4 digits of account number		5154					
	and Address	On which entry in Part 1 or Part 2 did	-	_					
	II & Hammer, P.S. ox C-90006	Line 4.4 of (Check one):		Part 1: Creditors with Priority Unsecured Cla					
	vue, WA 98009		-	Part 2: Creditors with Nonpriority Unsecured	Claims				
		Last 4 digits of account number		9531					
Part 4:	Add the Amounts for Each Type of Ur	nsecured Claim							
	the amounts of certain types of unsecured cla		cal rep	orting purposes only. 28 U.S.C. §159. Add	I the amounts for each				
	of unsecured claim.		•	· · · · ·					

Schedule E/F: Creditors Who Have Unsecured Claims

Page 7 of 8

Total Claim

Debtor 1 Bil	lups, G	Grant Alexander	Case n	umber (f	known)
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
			•		Total Claim
	6f.	Student loans	6f.	\$	0.00
Total claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	41,342.82

6j. Total Nonpriority. Add lines 6f through 6i.

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Fill in th				
Debtor 1				
	First Name	Middle Name	Last Name)
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	WESTERN DISTRICT (DF WASHINGTON, TACOMA DIVISION	
Case number				
(if known)				☐ Check if this is an
				amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code State what the contract or lease is for

.1 Planet Fltness 817 E 72nd St Tacoma, WA 98404-1094 **Gym Membership**

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

Page 1 of 1

Fill in	this information to identify your case:		
Debtor 1	Grant Alexander Billups		
Debtor 2	First Name Middle Name	Last Name	
(Spouse if, filing)	First Name Middle Name	Last Name	
United States	Bankruptcy Court for the: WESTERN DISTR	RICT OF WASHINGTON, TACOM	A DIVISION
Case number			
(if known)			☐ Check if this is an
			amended filing
Official F	orm 106H		
Schedul	e H: Your Codebtors		12/15
re filing toget and number th ase number (her, both are equally responsible for supplyi e entries in the boxes on the left. Attach the if known). Answer every question.	ng correct information. If more s Additional Page to this page. On	plete and accurate as possible. If two married people pace is needed, copy the Additional Page, fill it out, the top of any Additional Pages, write your name and
i. Do you	have any codebtors? (If you are filing a joint ca	ase, do not list eltrier spouse as a co	debitor.
■ No □ Yes			
	the last 8 years, have you lived in a commun Idaho, Louisiana, Nevada, New Mexico, Puerto		community property states and territories include Arizona, sconsin.)
□ No. Go ■ Yes. Di	d your spouse, former spouse, or legal equivalent	live with you at the time?	
			E'' i de la companya
	In which community state or territory did you live Danielle Christianson Apt Z207 1715 E Main Puyallup, WA 98372-7012	ve? <u>WA</u>	. Fill in the name and current address of that person.
	Name of your spouse, former spouse, or legal equivalent Number, Street, City, State & Zip Code		
line 2 aga 106D), Sc Column 2	n 1, list all of your codebtors. Do not include in as a codebtor only if that person is a guara hedule E/F (Official Form 106E/F), or Schedu .mn 1: Your codebtor	antor or cosigner. Make sure you	r spouse is filing with you. List the person shown in have listed the creditor on Schedule D (Official Formhedule D, Schedule E/F, or Schedule G to fill out Column 2: The creditor to whom you owe the debt
ivame	e, Number, Street, City, State and ZIP Code		Check all schedules that apply:
3.1 Nam	e		Schedule D, line
140111			☐ Schedule E/F, line
Num City	ber Street State	ZIP Code	
3.2 Nam	е		☐ Schedule D, line ☐ Schedule E/F, line ☐ Schedule G, line
Num City	ber Street State	ZIP Code	

Official Form 106H Software Copyright (c) 2019 CINGroup - www.cincompass.com

Schedule H: Your Codebtors

Fill	in this information to identify your ca	se:								
Del	otor 1 Grant Alexa	nder Billups			_					
_	otor 2 use, if filing)				_					
Uni	ted States Bankruptcy Court for the:	WESTERN DISTRICT	OF WASHING	TON,	_					
(If kr	se number lown)					□ A		ed filing ent showi	ing postpetition owing date:	chapter 13
0	fficial Form 106l					N	1M / DD/ \	YYYY		
S	chedule I: Your Inco	me								12/15
spo atta	plying correct information. If you a use. If you are separated and your ch a separate sheet to this form. O t 1: Describe Employment Fill in your employment	spouse is not filing with	h you, do not in	clude informa	tion	about y	our spou	se. If mo	ore space is ne	eded,
١.	information.		Debtor 1				Debtor 2	2 or non-	filing spouse	
	If you have more than one job, attach a separate page with information about additional	Employment status	■ Employed				☐ Employed —			
		p.c.,	☐ Not employ	/ed			☐ Not e	mployed		
	employers.	Occupation	Operation S	Specialist						
	Include part-time, seasonal, or self-employed work.	Employer's name	PACCAR							
	Occupation may include student or homemaker, if it applies.	Employer's address	650 Milwau Algona, WA	kee Ave N \ 98001-7409)					
		How long employed th	nere? 1 y	ears and 1 n	nor	ths				
Par	t 2: Give Details About Mon	thly Income					_			
Esti	mate monthly income as of the dates so you are separated.		ou have nothing t	o report for any	line	, write \$0) in the sp	ace. Inclu	ude your non-filir	ng spouse
	u or your non-filing spouse have more ee, attach a separate sheet to this form		oine the information	on for all emplo	yers	for that	person on	the lines	below. If you ne	ed more
						For Dek	otor 1		ebtor 2 or iling spouse	
2.	List monthly gross wages, salary deductions). If not paid monthly, ca			2.	\$	2	,898.13	\$	N/A	
3.	Estimate and list monthly overting	ne pay.		3.	+\$		0.00	+\$ _	N/A	
4.	Calculate gross Income. Add line	e 2 + line 3.		4.	\$	2,89	98.13	\$_	N/A	

_					non-filing	r 2 or
Copy	line 4 here	4.	\$	2,898.13	\$	N/A
l ist :	all payroll deductions:					
		53	•	400.00	¢	N/A
	the state of the s		· · —			N/A N/A
	•		· —		·	N/A
					·	N/A
	• • • •		· —		· <u> </u>	N/A
			· —		· <u> </u>	N/A
	•		· —		·	N/A
-		-	· -		· <u> </u>	N/A
JII.						N/A N/A
			· —		· -	N/A N/A
			· —		· <u> </u>	N/A
			· -		·	N/A
ا ماما		—	· —	-	· 	
			· · ·		· 	<u>N/A</u>
Calc	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$ <u> </u>	2,166.10	\$	N/A
8a.	Net income regularly received. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$	N/A
8b.	Interest and dividends	8b.	\$		\$	N/A
8d.	regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation	8c. 8d.	\$ \$	0.00	\$	N/A N/A
8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.	8f.	\$ \$		\$	N/A
8g.	Pension or retirement income	8g.	\$	0.00	\$	N/A
8h.	Other monthly income. Specify:	8h.+	\$	0.00	+ \$	N/A
Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	N/A
	•	10. \$	2	2,166.10 + \$_	N/A	<u>1</u> = \$ <u>2,166.10</u>
Include other Do no	de contributions from an unmarried partner, members of your household, your d friends or relatives. of include any amounts already included in lines 2-10 or amounts that are not av	dependen		,	Schedule J.	+\$0.00
						\$ 2,166.10
Do y∘	No.	1?				Combined monthly income
	5a. 5b. 5c. 5d. 5e. 5f. 5g. 5h. Add Calci List: 8a. 8b. 8c. 8f. 8d. 8e. 8f. Add Write Do no Special Add Write Do you you have to be your poor you have you	5b. Mandatory contributions for retirement plans 5c. Voluntary contributions for retirement plans 5d. Required repayments of retirement fund loans 5e. Insurance 5f. Domestic support obligations 5g. Union dues 5h. Other deductions. Specify: Charity industrial ins PaCCAR Medical Dental/vision Sipp Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. Calculate total monthly take-home pay. Subtract line 6 from line 4. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8e. Social Security 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8g. Pension or retirement income 8h. Other monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse. State all other regular contributions to the expenses that you list in Schedule Include contributions from an unmarried partner, members of your household, your other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not at Specify: Add the amount in the last column of line 10 to the amount in line 11. The res Write that amount on the Summary of Schedules and Statistical Summary of Certain	5a. Tax, Medicare, and Social Security deductions 5b. Mandatory contributions for retirement plans 5c. Voluntary contributions for retirement plans 5c. Nequired repayments of retirement fund loans 5d. Required repayments of retirement fund loans 5d. Insurance 5e. Insurance 5e. Domestic support obligations 5f. Other deductions. Specify: Charity industrial ins PacCAR Medical Dental/vision Sipp Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filling spouse, or a dependent regularly receive lnclude alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8d. Social Security 8e. 8d. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. 8pecify: 8g. Pension or retirement income 8h. Other monthly income. Add line 7 + line 9. Add all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependent refineds or relatives. Calculate monthly income an unmarried partner, members of your household, your dependent of relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to Specify: Add the amount in the last column of line 10 to the amount in line 11. The result is the Write that amount on the Summary of Schedules and Statistical Summary of Certain Liebilities. Bo you expect	5a. Tax, Medicare, and Social Security deductions 5b. Mandatory contributions for retirement plans 5c. Voluntary contributions for retirement plans 5c. Voluntary contributions for retirement plans 5c. Nature of the security of the securit	5a. Tax, Medicare, and Social Security deductions 5b. Mandatory contributions for retirement plans 5c. Voluntary contributions for retirement plans 5c. Voluntary contributions for retirement plans 5c. Required repayments of retirement fund loans 5c. Insurance 5c. Insurance 5c. Voluntary contributions for retirement fund loans 5c. Insurance 5c. Voluntary contributions for retirement fund loans 5c. Insurance 5c. Voluntary contributions for retirement fund loans 5c. Voluntary contributions 5c. Voluntary	5a. Tax, Medicare, and Social Security deductions 5b. Mandatory contributions for retirement plans 5b. \$ 0.00 5c. Voluntary contributions for retirement plans 5c. \$ 0.00 5d. Required repayments of retirement fund loans 5d. \$ 0.00 5 5d. Required repayments of retirement fund loans 5d. \$ 0.00 5 5d. Domestic support obligations 5d. \$ 0.00 5 5d. Domestic support obligations 5d. \$ 0.00 5 5d. Union dues 5d. \$ 0.00 5 5d. \$

Official Form 106I Schedule I: Your Income page 2

Fill	in this information to identify you	ur case:				
Deb	tor 1 Grant Alexan	der Billups		Che	eck if this is:	
D-1-					An amended filing	
	ouse, if filing)				expenses as of the	ing postpetition chapter 13 following date:
Unit	ed States Bankruptcy Court for the:	WESTERN DISTRICT OF WASH TACOMA DIVISION	IINGTON,		MM / DD / YYYY	
	e number nown)					
Of	ficial Form 106J					
So	chedule J: Your E	xpenses				12/15
info		possible. If two married people are ded, attach another sheet to this fon.				
Par 1.	Is this a joint case?	old				
1.	No. Go to line 2.					
	☐ Yes. Does Debtor 2 live in	a separate household?				
	☐ No ☐ Yes. Debtor 2 must	t file Official Form 106J-2,Expenses	for Separate Househ	oldof Debt	or 2.	
2.	Do you have dependents?	■ No				
	Do not list Debtor 1 and Debtor 2.	Yes. Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state the					□ No
	dependents names.					☐ Yes
						□ No □ Yes
						□ res □ No
						☐ Yes
						□ No
						☐ Yes
3.	Do your expenses include expenses of people other tha yourself and your dependent	- IIVec				
Par						
exp		ur bankruptcy filing date unless yo ankruptcy is filed. If this is a supple				
		on-cash government assistance if ye included it on Schedule I: Your I				
	icial Form 106l.)				Your expe	enses
4.	The rental or home ownershi payments and any rent for the g	ip expenses for your residence. In ground or lot.	clude first mortgage	4.	\$	400.00
	If not included in line 4:					
	4a. Real estate taxes			4a.	\$	0.00
	4b. Property, homeowner's, o			4b.	·	0.00
	·	pair, and upkeep expenses		4c.	·	0.00
F	4d. Homeowner's association	on or condominium dues		4d.	\$	0.00

Official Form 106J Schedule J: Your Expenses page 1

_	Billups, Grant Alexander Ca	ase num	ber (if kr	nown)
Utilitie			_	
	Electricity, heat, natural gas	6a.	_	115.00
	Nater, sewer, garbage collection	6b.		0.00
	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	0.00
	Other. Specify:	6d.	· —	0.00
	and housekeeping supplies	7.	. —	400.00
	are and children's education costs	8.	\$	0.00
	ng, laundry, and dry cleaning	9.	\$	50.00
Persor	nal care products and services	10.	\$	50.00
	al and dental expenses	11.	\$	50.00
	portation. Include gas, maintenance, bus or train fare. include car payments.	12.	\$	75.00
	ainment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
	able contributions and religious donations	14.	\$	75.00
Insura	•		· —	
	include insurance deducted from your pay or included in lines 4 or 20.			
	Life insurance		\$	0.00
15b.	Health insurance	15b.		0.00
15c.	Vehicle insurance	15c.	\$	215.00
15d.	Other insurance. Specify:	15d.	\$	0.00
Taxes. Specify	Do not include taxes deducted from your pay or included in lines 4 or 20.	- 16.	\$	0.00
	ment or lease payments:	-	· —	
	Car payments for Vehicle 1	17a.	\$	385.00
17b.	Car payments for Vehicle 2	17b.	\$	0.00
17c.	Other. Specify:	17c.	\$	0.00
	Other. Specify:	- 17d.	\$	0.00
	ayments of alimony, maintenance, and support that you did not report as	_		
deduc	ted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
Other	payments you make to support others who do not live with you.		\$	0.00
Specify		19.		
	real property expenses not included in lines 4 or 5 of this form or on Schedule			
	Mortgages on other property	20a.		0.00
	Real estate taxes	20b.	_	0.00
	Property, homeowner's, or renter's insurance	20c.		0.00
	Maintenance, repair, and upkeep expenses	20d.	· . —	0.00
	Homeowner's association or condominium dues	20e.	· · · —	0.00
	Specify: Car Tabs & Maintenance	_ 21.	· · —	100.00
Hair c		_	+\$ _	60.00
	o Membership	_	+\$_	5.00
	g lunches out	_	+\$ _	50.00
Spoti	•	_	+\$_	10.00
Misce	allaneous	_	_+\$	125.00
Calcul	ate your monthly expenses			
	dd lines 4 through 21.		\$	2,165.00
	opy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$ -	
	dd line 22a and 22b. The result is your monthly expenses.		\$ _	2,165.00
Calcul	ate your monthly net income.			
	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	2,166.10
23b.	Copy your monthly expenses from line 22c above.	23b.	-\$	2,165.00
	Subtract your monthly expenses from your monthly income. The result is your monthly net income.	23c.	\$	1.10
23c.	Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .		\$,
For exa	u expect an increase or decrease in your expenses within the year after you file mple, do you expect to finish paying for your car loan within the year or do you expect your mo stion to the terms of your mortgage?			to increase or decrease because of

Fill in this info	ormation to identify yo	our case:					
Debtor 1	Grant Alexander						
	First Name	Middle Name	La	st Name			
Debtor 2 (Spouse if, filing)	First Name	Middle Name	La	st Name			
United States Ban	kruptcy Court for the:	WESTERN DISTRIC	CT OF WASHIN	NGTON, TACOMA DIV	ISION		
Case number(if known)						☐ Check if this amended filir	
Official Form Declarati	106Dec on About a	ın Individu	al Debt	or's Sched	ules		12/15
You must file this obtaining money o years, or both. 18		e bankruptcy schedul connection with a ba	les or amende	d schedules. Making a	ı false stateı	ment, concealing proper), or imprisonment for u	
Did you pay	or agree to pay some	one who is NOT an att	torney to help	you fill out bankruptc	y forms?		
■ No □ Yes. Na	ame of person					nkruptcy Petition Preparer n, and Signature (Official F	
	y of perjury, I declare t true and correct.	hat I have read the su	ummary and so	chedules filed with this	s declaration	n and	
Grant A	nt A. Billups Llexander Billups e of Debtor 1		x	Signature of Debtor 2			

Date **January 20, 2019**

	Fill in this information to identify you	ur case:				
Debt	or 1 Grant Alexander Billu	ps				
D . l . r	First Name	Middle Name	Last Name			
Debt (Spou	or 2 e if, filing) First Name	Middle Name	Last Name			
Unite	d States Bankruptcy Court for the: WE	STERN DISTRICT C	OF WASHINGTON, TACOMA DIVISION			
Case	number					
(if kno						this is an
					amende	ed filing
∩ff	oial Form 106Sum					
	cial Form 106Sum	l iahilities an	nd Certain Statistical Information	an .	15	2/15
			re filing together, both are equally responsible			
inforr		t; then complete the	information on this form. If you are filing ame			
	<u> </u>	anninary and check	the box at the top of this page.			
Part	Summarize Your Assets					
					Your ass Value of v	sets what you own
1.	Schedule A/B: Property (Official Form 10	6A/B)				
	1a. Copy line 55, Total real estate, from So	chedule A/B			\$	0.00
	1b. Copy line 62, Total personal property,	from Schedule A/B			\$	15,117.00
	1c. Copy line 63, Total of all property on S	chedule A/B			\$	15,117.00
Part	2: Summarize Your Liabilities					
					Your liab	nilities
					Amount y	
	Schedule D: Creditors Who Have Claims S		Official Form 106D) be bottom of the last page of Part 1 of Schedule D		\$	13,908.00
			, 3		—	,
3.	Schedule E/F: Creditors Who Have Unsec 3a. Copy the total claims from Part 1 (pric		s) from line 6e & chedule E/F		\$	0.00
	3b. Copy the total claims from Part 2 (non	priority unsecured cla	aims) from line 6j s chedule E/F		\$	41,342.82
			Your total liabil	ities \$_		55,250.82
Part	Summarize Your Income and Expe	nses				
4.	Schedule I: Your Income(Official Form 106 Copy your combined monthly income from				\$	2,166.10
	Schedule J: Your Expenses (Official Form	,			•	2.465.00
	Copy your monthly expenses from line 22c				\$	2,165.00
Part	4: Answer These Questions for Admir	nistrative and Statis	tical Records			
6.	Are you filing for bankruptcy under Cha	•	al distribution of a basis of the form of the control of the contr			_
	No. You have nothing to report on this	part or the form. Che	ck this box and submit this form to the court with y	our other	schedule	5.
7	Yes					
7.	What kind of debt do you have?					
	Your debts are primarily consumer purpose." 11 U.S.C. § 101(8). Fill out		ebts are those "incurred by an individual primarily focal purposes. 28 U.S.C§ 159.	or a perso	onal, famil	y, or household

☐ Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

8. **From the** Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$_____3,344.71

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$)0
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$0.0)0
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$0.0	<u>)0</u>
9d. Student loans. (Copy line 6f.)	\$)0
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$)0
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$0.0	<u>)0</u>
9g. Total. Add lines 9a through 9f.	\$0.00	-

Debtor 1						
	Grant Alexander Bill First Name	Middle Name	Last Name			
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bar	nkruptcy Court for the: W	ESTERN DISTRICT OF WAS	HINGTON, TACOMA DIVISION			
Case number(if known)					Check if this is an amended filing	
Be as complete ar	of Financial Affa	two married people are filing	s Filing for Bankruptcy together, both are equally responsible			4/1 umbe
(if known). Answe	er every question.	·		,		
	etalis About Your Marital	Status and Where You Lived	Setore			
_	current marital status?					
 What is your Married Not man 						
☐ Married ☐ Not marr	ried	anywhere other than where y	ou live now?			
☐ Married ☐ Not married. Coloring the late ☐ No	ried ast 3 years, have you lived	anywhere other than where y the last 3 years. Do not include				
☐ Married ☐ Not married. Coloring the late ☐ No	ried sst 3 years, have you lived t all of the places you lived in				Dates Debtor 2	
☐ Married ☐ Not marri 2. During the la ☐ No ☐ Yes. List	ried ast 3 years, have you lived t all of the places you lived in for Address: ler St	the last 3 years. Do not include Dates Debtor 1 lived	where you live now.			
☐ Married ☐ Not marri 2. During the la ☐ No ☐ Yes. List Debtor 1 Pri 6715 A Tyl Tacoma, V	ried ast 3 years, have you lived t all of the places you lived in for Address: ler St	the last 3 years. Do not include Dates Debtor 1 lived there From-To: May, 2017 to October, 2017	where you live now. Debtor 2 Prior Address:		lived there ☐ Same as Deb	tor 1

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Debt	tor 1	Billups, G	rant Alexand	er	Case	e number (if known)	
Part	2	Explain the S	Sources of You	ır Income			
I	Fill in t	the total amou	unt of income yo	mployment or from operating ou received from all jobs and a have income that you receive to	all businesses, including part-t	ime activities.	ndar years?
	_	lo 'es. Fill in the	details.				
				Debtor 1		Debtor 2	
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		uary 1 of cur ou filed for b	rent year until ankruptcy:	■ Wages, commissions, bonuses, tips	\$1,337.00	☐ Wages, commissions, bonuses, tips	
				☐ Operating a business		☐ Operating a business	
		alendar year: I to Decembe		■ Wages, commissions, bonuses, tips	\$39,883.87	☐ Wages, commissions, bonuses, tips	
				☐ Operating a business		☐ Operating a business	
		lendar year I I to Decembe		■ Wages, commissions, bonuses, tips	\$13,983.42	☐ Wages, commissions, bonuses, tips	
				☐ Operating a business		☐ Operating a business	
)	Include other pyou are List ea	e income rega public benefit pe filing a joint	rdless of whether payments; pensicase and you ha	e during this year or the two er that income is taxable. Exam ons; rental income; interest; di we income that you received to me from each source separatel	ples of other income are alimovidends; money collected from gether, list it only once under E	lawsuits; royalties; and gamb Debtor 1.	
				Debtor 1		Debtor 2	
				Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income (before deductions and exclusions)
Part	3:	List Certain	Payments You	Made Before You Filed for E	Bankruptcy		
	_	lo. Neither individua	Debtor 1 nor D al primarily for a the 90 days before Go to line 7 List below expreditor. Do	s debts primarily consumer bebtor 2 has primarily consumer personal, family, or household re you filed for bankruptcy, did 7. beach creditor to whom you paid to not include payments for dor on an attorney for this bankruptcy and the payments bankruptcy of this bankruptcy.	mer debts. Consumer debts a purpose." you pay any creditor a total of a total of \$6,425* or more in omestic support obligations, su	\$6,425* or more? one or more payments and the	total amount you paid that
		* Subje		on 4/01/19 and every 3 years		after the date of adjustment.	

Statement of Financial Affairs for Individuals Filing for Bankruptcy

9.	List all such matters, including personal injury and contract disputes. No Yes. Fill in the details. Case title Case number Bank of America NA Plaintiff vs. Grant A. Billups Defendant 8Z89103 Credit Acceptance Corporation Plaintiffs vs. Grant Billups Defendant 19-2-04515-4 Within 1 year before you filed for bankrupt Check all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below. Creditor Name and Address	Nature of the case Action to collect a debt Action to collect a debt: Summons served	Court or agency Pierce County Court 930 Tacoma A Floor Room23 Tacoma, WA 9 Pierce County Court 930 Tacoma A #110 Tacoma, WA 9	District venue S 2nd 9 8402 Superior ve So Room 8402	Status of th Pending On appe Conclud Pending Conclud	ne case eal ed
	and contract disputes. No Yes. Fill in the details. Case title Case number Bank of America NA Plaintiff vs. Grant A. Billups Defendant 8Z89103 Credit Acceptance Corporation Plaintiffs vs. Grant Billups Defendant 19-2-04515-4 Within 1 year before you filed for bankrupt Check all that apply and fill in the details belo	Nature of the case Action to collect a debt Action to collect a debt: Summons served	Court or agency Pierce County Court 930 Tacoma A Floor Room23 Tacoma, WA 9 Pierce County Court 930 Tacoma A #110 Tacoma, WA 9	District venue S 2nd 9 8402 Superior ve So Room 8402	Status of th Pending On appe Conclud Pending Conclud	ne case eal ed
9.	and contract disputes. No Yes. Fill in the details. Case title Case number Bank of America NA Plaintiff vs. Grant A. Billups Defendant 8Z89103 Credit Acceptance Corporation Plaintiffs vs. Grant Billups Defendant	Nature of the case Action to collect a debt: Action to collect a debt: Summons	Court or agency Pierce County Court 930 Tacoma A Floor Room23 Tacoma, WA 9 Pierce County Court 930 Tacoma A #110	District venue S 2nd 9 8402 Superior ve So Room	Status of th Pending Conclud Pending On appe	custody modifications, le case eal ed
9.	and contract disputes. ☐ No ☐ Yes. Fill in the details. Case title Case number Bank of America NA Plaintiff vs. Grant A. Billups Defendant	Nature of the case Action to collect a	Court or agency Pierce County Court 930 Tacoma A Floor Room23	District venue S 2nd	Status of th Pending On appe	custody modifications, le case
9.	and contract disputes. ☐ No ☐ Yes. Fill in the details. Case title	cases, small claims actions,	divorces, collection s		ns, support or o	custody modifications,
9.	and contract disputes.					
9.						
	rt 4: Identify Legal Actions, Repossession Within 1 year before you filed for bankrupt		v lavovit acust acti			
	<u></u>		paid	still owe	Include cred	
	■ No □ Yes. List all payments to an insider Insider's Name and Address	Dates of payment	Total amount	Amount you	Peason for	this payment
8.	Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cosi		ments or transfer ar	ny property on ac	count of a deb	ot that benefited an
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
	which you are an officer, director, person in cobusiness you operate as a sole proprietor. 11 to No Yes. List all payments to an insider.	ntrol, or owner of 20% or mo	re of their voting secu	irities; and any mar	aging agent, in	cluding one for a
7.	Within 1 year before you filed for bankrupt Insiders include your relatives; any general par					
	Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this pa	syment for
	☐ Yes List below each credit	or to whom you paid a total of c support obligations, such a				
	■ No. Go to line 7.					
		i for barna aptoy, ara you pay	any creditor a total of	\$600 or more?		
	Yes. Debtor 1 or Debtor 2 or both ha During the 90 days before you filed	-				

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Der	Billups, Grant Alexander	Case	number (if known)		
	Creditor Name and Address	Describe the Property	Date	Value of the	
		Explain what happened		property	
	Bank of America	GArnishment on wages	PENDING	\$0.00	
		☐ Property was repossessed.			
		☐ Property was foreclosed.			
		■ Property was garnished.			
		\square Property was attached, seized or levied.			
	Harborstone Credit Union PO Box 4207	2010 Toyota Corolla	October, 2016	\$0.00	
	Tacoma, WA 98438-0207	■ Property was repossessed.			
		☐ Property was foreclosed.			
		☐ Property was garnished.			
		☐ Property was attached, seized or levied.			
	Credit Acceptance PO Box 513	2011 Ford Fusion	July, 2017	\$0.00	
	Southfield, MI 48037-0513	■ Property was repossessed.			
		☐ Property was foreclosed.			
		☐ Property was garnished.			
		☐ Property was attached, seized or levied.			
11.	Within 90 days before you filed for bankrupt accounts or refuse to make a payment because No Yes. Fill in the details.		cial institution, set off any amou	nts from your	
	Creditor Name and Address	Describe the action the creditor took	Date action was taken	Amoun	
12.	Within 1 year before you filed for bankruptcy court-appointed receiver, a custodian, or an	y, was any of your property in the possession other official?	of an assignee for the benefit of	creditors, a	
	No				
	☐ Yes				
Par	t 5: List Certain Gifts and Contributions				
13.	Within 2 years before you filed for bankrupto ☐ No	cy, did you give any gifts with a total value of	more than \$600 per person?		
	Yes. Fill in the details for each gift.				
	Gifts with a total value of more than \$600 person	er Describe the gifts	Dates you gave the gifts	Value	
	Person to Whom You Gave the Gift and Address:				
	Christan Faith Center 33645 20th Avebue S Federal Way, WA 98001	Tithes	2018/2019	\$0.00	

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 4

Person's relationship to you: Church

Dei	Billups, Grant Alexander			ase number (if known)		
14.	Within 2 years before you filed for bankro ■ No □ Yes. Fill in the details for each gift or co			with a total value of mo	ore than \$6	600 to any charity?
	Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code	otal	Describe what you contributed	Dates yo contribut		Value
Par	t 6: List Certain Losses					
15.	Within 1 year before you filed for bankru or gambling?	ptcy or	since you filed for bankruptcy, did yo	u lose anything becaus	e of theft,	fire, other disaster,
	■ No □ Yes. Fill in the details.					
	Describe the property you lost and how the loss occurred	Include	be any insurance coverage for the lose the amount that insurance has paid. Lince claims on line 33 of Schedule A/B: P	st pending loss	our	Value of property lost
Par	t 7: List Certain Payments or Transfers	3				
16.	Within 1 year before you filed for bankrup consulted about seeking bankruptcy or p Include any attorneys, bankruptcy petition pro	reparin	g a bankruptcy petition?	. ,		y to anyone you
	□ No					
	Yes. Fill in the details.					
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Y	ou	Description and value of any prope transferred	rty Date pay transfer wade		Amount of payment
	The Law Office Of Rafal A. Gorski 10116 36th Avenue Ct SW Ste 206 Lakewood, WA 98499-6003		Attorney Fees	Various	dates	\$900.00
	Cricket Debt Counseling 10121 SE Sunnyside Rd # 300 Clackamas, OR 97015-5713		Credit counseling	January 2018	13,	\$24.00
17.	Within 1 year before you filed for bankrupromised to help you deal with your cred Do not include any payment or transfer that y	litors or	to make payments to your creditors?		y propert	y to anyone who
	■ No □ Yes. Fill in the details.					
	Person Who Was Paid Address		Description and value of any prope transferred	rty Date pay transfer v made		Amount of payment
18.	Within 2 years before you filed for bankri transferred in the ordinary course of you include both outright transfers and transfers gifts and transfers that you have already listed No Yes. Fill in the details.	r busin made as	ess or financial affairs? s security (such as the granting of a secu		,	
	Person Who Received Transfer Address		Description and value of property transferred	Describe any propert payments received o paid in exchange		Date transfer was made
	Person's relationship to you					

19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a

Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 5

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Debtor 1 Billups, Grant Alexander		Case no	umber (if known)	
beneficiary? (These are often called asset-n ■ No □ Yes. Fill in the details.	protection devices.)			
Name of trust	Description and	d value of the property trai	nsferred	Date Transfer was
Part 8: List of Certain Financial Accounts,	Instrumente Safa Denas	it Payer, and Starage Unit	4 0	made
20. Within 1 year before you filed for bankrul sold, moved, or transferred? Include checking, savings, money marke houses, pension funds, cooperatives, as:	ptcy, were any financial a	ccounts or instruments he	eld in your name, or for yo	
Yes. Fill in the details. Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
Bank of America	xxxx-	■ Checking □ Savings □ Money Market □ Brokerage □ Other	2018	\$0.00
Wells Fargo Bank	xxxx-2479	■ Checking □ Savings □ Money Market □ Brokerage □ Other	1/15/19	\$0.00
Key Bank NA	XXXX-	■ Checking □ Savings □ Money Market □ Brokerage □ Other	Closed 2017	\$0.00
US Bank	XXXX-	■ Checking □ Savings □ Money Market □ Brokerage □ Other	Closed 2017	\$0.00
21. Do you now have, or did you have within cash, or other valuables?	1 year before you filed fo	or bankruptcy, any safe de	eposit box or other deposi	itory for securities,
Yes. Fill in the details.				
Name of Financial Institution Address (Number, Street, City, State and ZIP Code	Who else had a Address (Number and ZIP Code)		be the contents	Do you still have it?

Statement of Financial Affairs for Individuals Filing for Bankruptcy

DCL	Billups, Grafit Alexander		Case Harriber (II known)	
22.	Have you stored property in a storage unit or pla	ace other than your home within 1	year before you filed for bankruptcy?	
	■ No			
	☐ Yes. Fill in the details.			
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?
Par	t 9: Identify Property You Hold or Control for	Someone Else		
23.			y you borrowed from, are storing for,	or hold in trust for
	■ No			
	Yes. Fill in the details.			
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value
Par	t 10: Give Details About Environmental Informa	ation		
	the purpose of Part 10, the following definitions a			
_	and purpose of that to, the following definitions of	-pp.y.		
	Environmental law means any federal, state, or toxic substances, wastes, or material into the air controlling the cleanup of these substances, wa	r, land, soil, surface water, groundv	•	
	Site means any location, facility, or property as own, operate, or utilize it, including disposal site	-	aw, whether you now own, operate, or	utilize it or used to
	Hazardous material means anything an environmenterial, pollutant, contaminant, or similar term.		waste, hazardous substance, toxic su	bstance, hazardous
Rep	ort all notices, releases, and proceedings that yo	ou know about, regardless of when t	they occurred.	
24.	Has any governmental unit notified you that you	u may be liable or potentially liable	under or in violation of an environme	ntal law?
	■ No			
	Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
25.	Have you notified any governmental unit of any	·		
	■ No □ Yes. Fill in the details.			
	Name of site	Governmental unit	Environmental law, if you	Date of notice
	Address (Number, Street, City, State and ZIP Code)	Address (Number, Street, City, State and ZIP Code)		Date of Hotice
26.	Have you been a party in any judicial or adminis	strative proceeding under any envir	onmental law? Include settlements ar	nd orders.
	■ No □ Yes. Fill in the details.			
	Case Title	Court or agency	Nature of the case	Status of the
	Case Number	Name Address (Number, Street, City, State and ZIP Code)		case
Par	t 11: Give Details About Your Business or Con	nections to Any Business		
27.	Within 4 years before you filed for bankruptcy, o	did you own a business or have any	of the following connections to any	business?
	■ A sole proprietor or self-employed in a t	rade, profession, or other activity,	either full-time or part-time	
	☐ A member of a limited liability company	(LLC) or limited liability partnership	p (LLP)	
Offici		of Financial Affairs for Individuals Filing		page 7
Softw	are Copyright (c) 2019 CINGroup - www.cincompass.com			

Case 19-40170-MJH Doc 1 Filed 01/20/19 Ent. 01/20/19 16:06:36 Pg. 48 of 56

Debtor 1 Billups, Grant Alexander	C	Case number (if	known)		
	_				
☐ A partner in a partnership					
☐ An officer, director, or managing e	xecutive of a corporation				
☐ An owner of at least 5% of the voti	ng or equity securities of a corporation				
\square No. None of the above applies. Go to	Part 12.				
Yes. Check all that apply above and fi	ill in the details below for each business.				
Business Name	Describe the nature of the business		Identification number		
Address (Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Do not include Social Security number or ITIN.			
			iness existed		
ABS Marketing 9836 Pleasant Lake Blvd Apt U24	Selling DirectTV	EIN:			
Parma, OH 44130-7496	Self	From-To	November, 2016 to May, 2017 no oncome & no assets from business		
■ No □ Yes. Fill in the details below. Name Address (Number, Street, City, State and ZIP Code)	Date Issued				
Part 12: Sign Below					
I have read the answers on this Statement of Fittrue and correct. I understand that making a fall bankruptcy case can result in fines up to \$250,0 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Grant A. Billups	se statement, concealing property, or obtain	ning money of			
Grant Alexander Billups Signature of Debtor 1	Signature of Debtor 2				
· ·					
Date January 20, 2019	Date				
Did you attach additional pages to Your Statem ■ No □ Yes	ent of Financial Affairs for Individuals Filing	g for Bankrupi	tcy (Official Form 107)?		
Did you pay or agree to pay someone who is no ■ No □ Yes. Name of Person Attach the Bankri			Official Form 119).		

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Fill in	n this infor	nation to identify your case:						irected in this form and	in Form
Debt	tor 1	Grant Alexander Billups			122	2A-1Su	pp:		
Debt (Spou	tor 2 se, if filing)				_	■ 1. T	here is no pres	umption of abuse	
Unite	ed States E	Western District Tacoma Division		ington,	'	a	applies will be m	o determine if a presur nade under <i>Chapter 7 N</i> cial Form 122A-2).	•
Case (if kno	e number own)				'			does not apply now becout it could apply later.	ause of qualified
						☐ Ch	eck if this is a	n amended filing	
Off	icial F	orm 122A - 1						3	
		7 Statement of Your Cu	rron	t Mar	thly Inc	om.	.		12/15
CII	apter	7 Statement of Tour Cu	Hell	LIVIOI	itiliy ilic	OIIIE			12/15
a sepa	arate sheet er (if knowi ry service,	and accurate as possible. If two married people to this form. Include the line number to which on). If you believe that you are exempted from a complete and file Statement of Exemption from Iculate Your Current Monthly Income	the additi	ional infor	mation applies.	On the	top of any addit	ional pages, write your r consumer debts or beca	name and case use of qualifying
1.	What is v	our marital and filing status? Check one o	nlv.						
	_	arried. Fill out Column A, lines 2-11.	,.						
	_	d and your spouse is filing with you. Fill o	ut hoth (Columns	A and B lines 2	2-11			
		d and your spouse is NOT filing with you.							
	_	ng in the same household and are not leg		•	•	ımns A	and R lines 2-	11	
	☐ Livi per	ng separately or are legally separated. Fill alty of perjury that you and your spouse are lert for reasons that do not include evading the	out Colu gally sep	umn A, lir parated ur	nes 2-11; do not nder nonbankrup	t fill out	Column B. By that applies or	checking this box, you	
10 6 i	1(10A). For months, add	rage monthly income that you received from a example, if you are filing on September 15, the 6-the income for all 6 months and divide the total by rental property, put the income from that property	month per / 6. Fill in	riod would the result.	be March 1 throu Do not include an	gh Augu ny incom	ust 31. If the amo ne amount more t	unt of your monthly incom han once. For example, if	e varied during the
				•		Colun		Column B Debtor 2 or non-filing spouse	
2.	Your gros	ss wages, salary, tips, bonuses, overtime, ductions).	and cor	mmissioı	ns (before all	\$	3,286.38	\$	
3.		and maintenance payments. Do not include is filled in.	paymer	nts from a	a spouse if	\$	0.00	\$	
4.	of you or from an un roommate	nts from any source which are regularly p your dependents, including child suppor married partner, members of your household is. Include regular contributions from a spou- clude payments you listed on line 3	t. Include	e regular	contributions	ı. \$	0.00	\$	
5.	Net incon	ne from operating a business, profession,	or farm						
					otor 1				
	Gross rec	eipts (before all deductions)	\$_	0.00					
	Ordinary a	and necessary operating expenses	- \$ _	0.00		•	0.00	•	
		nly income from a business, profession, or fa	rm \$ _	0.00	Copy here ->	\$	0.00	\$	
6.	Net incon	ne from rental and other real property		.	ton 4				
			œ.		otor 1				
		eipts (before all deductions)	\$_	0.00					
	•	and necessary operating expenses	-\$_	0.00	Camurhana	¢.	0.00	¢	
1	Net month	nly income from rental or other real property	\$_	0.00	Copy here ->	Ф	0.00	\$	

Official Form 122A-1

Chapter 7 Statement of Your Current Monthly Income

0.00

page 1

7. Interest, dividends, and royalties

				Column A Debtor 1		Column B Debtor 2 or non-filing spouse	
8.	Unemployment compensation			\$	0.00	\$	
	Do not enter the amount if you contend that the amount r Social Security Act. Instead, list it here:	eceived was a benefit	under the				
	For you \$	S	0.00				
	For you S For your spouse S	S					
	Pension or retirement income. Do not include any amounder the Social Security Act.	ount received that was		\$	0.00	\$	
10.	Income from all other sources not listed above. Spe not include any benefits received under the Social Secur a victim of a war crime, a crime against humanity, or inte If necessary, list other sources on a separate page and p	ity Act or payments rec rnational or domestic t	ceived as				
	Worked for Safeway for 1 day in Augu	ust,		\$	58.33	\$	
				\$	0.00	\$	
	Total amounts from separate pages, if any.		+	\$	0.00	\$	
11.	Calculate your total current monthly income. Add lin each column. Then add the total for Column A to the to		\$	3,344.71	+ _		3,344.71
Part	2: Determine Whether the Means Test Applies to	o You				incon	ile
12.	Calculate your current monthly income for the year.	. Follow these steps:					
	12a. Copy your total current monthly income from line	11		Cop	y line 11 h	nere=>	3,344.71
	Multiply by 12 (the number of months in a year)					X	12
	12b. The result is your annual income for this part of the	form				12b. \$	40,136.52
13.	Calculate the median family income that applies to y	you. Follow these step	s:				
	Fill in the state in which you live.	WA					
	Fill in the number of people in your household.	1					
	Fill in the median family income for your state and size To find a list of applicable median income amounts, go form. This list may also be available at the bankruptcy of	online using the link	specified in	n the separa	ate instructi	15. φ	62,551.00
14.	How do the lines compare?						
	Line 12b is less than or equal to line 13. CGo to Part 3.	on the top of page 1, c	heck box	1T,here is no	presumption	on of abuse.	
	14b. Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A-2.	of page 1, check box 2	Zī,he presu	ımption of a	buse is det	ermined by Form 122A	1-2.
Part	3: Sign Below						
	By signing here, I declare under penalty of perjury t	hat the information on	this staten	nent and in	any attachn	nents is true and correc	ct.
	X /s/ Grant A. Billups						
	Grant Alexander Billups Signature of Debtor 1						
	Date <u>January 20, 2019</u> MM / DD / YYYY						
	If you checked line 14a, do NOT fill out or file Form	n 122A-2.					
	If you checked line 14b, fill out Form 122A-2 and f	ile it with this form.					

Official Form 122A-1

Chapter 7 Statement of Your Current Monthly Income

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1.717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to:
http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCreditAndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

United States Bankruptcy Court Western District of Washington, Tacoma Division

Disclosure of compensation paid to me was: Debtor Other (specify):	In re	Billups, Grant Alexander		Case No.		
1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows: For legal services, I have agreed to accept. Prior to the filing of this statement I have received. \$ 900.00 Balance Due. \$ 900.00 The source of the compensation paid to me was: Debtor Other (specify): The source of compensation to be paid to me is: Debtor Other (specify): The source of compensation to be paid to me is: T			Debtor(s)	Chapter	7	
compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows: For legal services, I have agreed to accept \$ 900.00 Prior to the filing of this statement I have received \$ 900.00 Balance Due \$ 900.00 2. The source of the compensation paid to me was: Debtor Other (specify): 3. The source of compensation to be paid to me is: Debtor Other (specify): 4. I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm. I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; c. Representation of thing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. [Other provisions as needed] CERTIFICATION I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) this bankruptcy proceeding. January 20, 2019 Date CERTIFICATION I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) this bankruptcy proceeding. January 20, 2019 Date CERTIFICATION 10116 36th Avenue Ct SW Ste 206 Lakewood, WA 98499-6003 gorskirafal@hotmail.com		DISCLOSURE OF COMPEN	NSATION OF ATTO	RNEY FOR I	DEBTOR	
Prior to the filing of this statement I have received \$ 30.00 8 alance Due \$ 0.00 2. The source of the compensation paid to me was: Debtor Other (specify): 3. The source of compensation to be paid to me is: Debtor Other (specify): 4. I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm. I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. copy of the agreement, together with a list of the names of the people sharing in the compensation is attached. 5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. [Other provisions as needed] 6. By agreement with the debtor(s), the above-disclosed fee does not include the following service: CERTIFICATION I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) this bankruptcy proceeding. January 20, 2019 Date CERTIFICATION I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) this bankruptcy proceeding. Rafal Gorski Signature of Attorney The Law Office Of Rafal A. Gorski 10116 36th Avenue Ct SW Ste 206 Lakewood, WA 98499-6003 gorskirafal@hotmail.com	C	ompensation paid to me within one year before the filing	of the petition in bankruptcy	, or agreed to be pa	id to me, for services re	at endered or to
Balance Due \$ 0.00 2. The source of the compensation paid to me was: Debtor Other (specify): 3. The source of compensation to be paid to me is: Debtor Other (specify): 4. I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm. I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. [Other provisions as needed] By agreement with the debtor(s), the above-disclosed fee does not include the following service: CERTIFICATION I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) this bankruptcy proceeding. January 20, 2019 Date Sel Rafal Gorski Rafal Gorski Rafal Gorski Rafal Gorski Signature of Attorney The Law Office Of Rafal A. Gorski 10116 36th Avenue Ct SW Ste 206 Lakewood, WA 98499-6003 gorskirafal@hotmail.com		For legal services, I have agreed to accept		\$	900.00	
2. The source of the compensation paid to me was: □ Debtor □ Other (specify): 3. The source of compensation to be paid to me is: □ Debtor □ Other (specify): 4. □ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm. □ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. □ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm copy of the agreement, together with a list of the names of the people sharing in the compensation is attached. 5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required. c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. [Other provisions as needed] 6. By agreement with the debtor(s), the above-disclosed fee does not include the following service: CERTIFICATION 1 certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) this bankruptcy proceeding. January 20, 2019 Date Js/ Rafal Gorski R					900.00	
■ Debtor □ Other (specify): 3. The source of compensation to be paid to me is: ■ Debtor □ Other (specify): 4. ■ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm. □ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. copy of the agreement, together with a list of the names of the people sharing in the compensation is attached. 5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. [Other provisions as needed] 6. By agreement with the debtor(s), the above-disclosed fee does not include the following service: CERTIFICATION I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) this bankruptcy proceeding. January 20, 2019 By Rafal Gorski Rafal Gorski Signature of Attorney The Law Office Of Rafal A. Gorski 10116 36th Avenue Ct SW Ste 206 Lakewood, WA 98499-6003 gorskirafal@hotmail.com		Balance Due		\$	0.00	
3. The source of compensation to be paid to me is: Debtor Other (specify): 4. I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm. I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. copy of the agreement, together with a list of the names of the people sharing in the compensation is attached. 5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. [Other provisions as needed] 6. By agreement with the debtor(s), the above-disclosed fee does not include the following service: CERTIFICATION I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) this bankruptcy proceeding. January 20, 2019 Date Is! Rafal Gorski Signature of Attorney The Law Office Of Rafal A. Gorski 10116 36th Avenue Ct SW Ste 206 Lakewood, WA 98499-6003 gorskirafal@hotmail.com	2. 7	The source of the compensation paid to me was:				
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The Law Office Of Rafal A. Gorski 10116 36th Avenue Ct SW Ste 206 Lakewood, WA 98499-6003 gorskirafal@hotmail.com	D	ate				
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